## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		May 1, 2007	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>	
1. Automobile Liability Private			
Passenger Commercial			
Automobile Physical Damage			
Private Passenger Commercial			
Liability Other Than Auto			
4. Burglary and Theft			
5. Glass			
6. Fidelity			
<ul><li>7. Surety</li><li>8. Boiler and Machinery</li></ul>			
9. Fire	95	-24.6%	
10. Extended Coverage	95 86	-24.6%	
11. Inland Marine		<u> </u>	
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other			
15. Other Line of Insurance			
Doos filing only apply to cortain territory	(territories) or certain classes? If so, specify:	No	
Does ming only apply to certain terntory	(terniones) of certain classes? If so, specify.	NO	
Brief description of filing (If filing follows	rates of an advisory organization, specify or	ganization):	
	2006-RLA1 and change LCM to 1.572.		
Traspites in 188 ining assignation of 1	todo (tanti dipo orientale notale)		
*Adjusted to reflect all prior rate changes **Change in Company's premium level v	s. vhich will result from application of new rates		
	America	re Insurance Company	
		Name of Company	
	•		
	Joan Walte	rs – Compliance Analyst I	
		Official – Title	



## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	May 1, 2007
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
Liability Other Than Auto		
4. Burglary and Theft		
5. Glass	<del></del>	
6. Fidelity		
7. Surety	<del></del>	
<ol> <li>Boiler and Machinery</li> <li>Fire</li> </ol>	3,612	-24.6%
10. Extended Coverage	10,447	-24.6%
11. Inland Marine		27.076
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		· · · · · · · · · · · · · · · · · · ·
15. Other		
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	No
Brief description of filing. (If filing follows Adopt LC in ISO filing designation CF-2	rates of an advisory organization, specify org 2006-RLA1 and change LCM to 1.706.	ganization):
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	s. which will result from application of new rates.	,
	Amerisure M	lutual Insurance Company
		lame of Company
		•
		s – Compliance Analyst I
		Official Title

JAN 2 5 2007

SPRINGFIELD, ILLINOIS

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or	rate level produced by rate revision effective	7/15/07
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Comm	ercial	
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8 Boiler and Machinery	TOO 044 504	+.03%
9. Fire	\$28,844,591.	<del></del>
10. Extended Coverage		
<ul><li>11. Inland Marine</li><li>12. Homeowners</li></ul>		
<ul><li>13. Commercial Multi-Peril</li><li>14. Crop Hail</li></ul>		
15. Other		
Line of Insurance	***************************************	
All three risk types are affected.  Brief description of filing. (If filing.)	rritory (territories) or certain classes? If so, specify g follows rates of an advisory organization, specify ors. Mercantile/Non-Manufacturing is being incre	cify organization): We are revising our
*Adjusted to reflect all prior rate ch	nanges.	
**Change in Company's premium	level which will result from application of new rate	s.
	The Cinc	innati Insurance Company
		Name of Company
	Connie Petert	onjes - Senior Filings Specialist
		Official – Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

JAN 1 8 2007

### Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Cha	ange in Company's premium or rate level	produced by rate revision effective	6-1-2007 NB, 7-1-2007 RB
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$6,395,559	-37.1%
	Extended Coverage		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hait		
15.	Other		
	Line of Insurance		
_			
Doe	es filing only apply to certain territory (terri	itories) or certain classes? If so, specify:	
	· · · · · · · · · · · · · · · · · · ·	·····	
Brie	ef description of filing. (If filing follows rate	s of an advisory organization, specify orga	anization): ISO
	ljusted to reflect all prior rate changes.	M left H d for our	
**C	hange in Company's premium level which	will result from application of new rates.	
		Consolidat	ed Insurance Company
			ne of Company
			echnician, Regulatory Filing
		C	Official – Title



### ILLINOIS DEPARTMENT OF INSURANCE

#### **SUMMARY SHEET**

vel produced by rate revision effective	01/01/2007 for both NB & RB
(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
-57,560  territories) or certain classes? If so, specify	-0.90 
s rates of an advisory organization, spec wal Business, we wish to file revisions to evising the rates to our Terrorism progran	to our currently approved Commercial
hich will result from application of new rate	es. dated Insurance Company Name of Company
	Annual Premium Volume (Illinois)*  -57,560  territories) or certain classes? If so, specifies rates of an advisory organization, specified Business, we wish to file revisions existing the rates to our Terrorism program

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

JAN 3 2007

Change in Company's premium or rate level produced by rate Revision effective May 1, 2007

	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	,		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		included
5.	Glass	included	meiudeu
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery	£1 752 025	-2.5%
9.	Fire	\$1,752,925 included	included
10.	Extended Coverage	mciadea	<u> </u>
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Line of Insurance		
	Line of insurance		
Does all c	filing only apply to certain territory (t lasses, all territories (including Fire	erritories) or certain classes? If /EMS-Pak program	so, specify:
Ado	description of filing. (If filing follows pting ISO Illinois Commercial Fire ising Company Loss Cost Multiplies	Allied Lines Loss Costs revision	ion, specify organization): ion, CF-2006-RLA1.
* A	djusted to reflect all prior rate change hange in Company's premium level w	s. hich will result from application	n of new rates.



Continental Western Insurance Company Name of Company

Vicki Jacobs, Research Analyst

Official - Title

Change in Company's premium or rate level produced by rate

RECEIVED

JAN 3 0 2007

IDFPR (MPC)

	revision effective	4/1/07		DIVISION OF INSU
	(1)		(2) Annual Premium	(3) SPRINGFIELD Percent
	Coverage		Volume (Illinois) *	<u>Change (+ or -) **</u>
1.	Automobile Liability Private Passenger			
2.	Commercial Automobile Physical Dama Private Passenger	ge		
	Commercial			
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire		1,878,889	-6.5%
0.	Extended Coverage		1,878,889	-6.5%
1.	Inland Marine			
2.	Homeowners			
3.	Commercial Multi-Peril			
١4.	Crop Hail			
15.	Other	<u>-</u> _		
	Line of Insurance			
	es filing only apply to certain			
Brie	ef description of filing. (If filing	g follows ra	tes of an advisory organiz	ation, specify organization):
F	tevising Type of Business Fa	ctors.		
** (	Adjusted to reflect all prior Change in Company's premit vill result from application of	ım level wh		
				Federated Mutual Insurance Company
			<del></del>	Name of Company
				Howard Hammel
				Official - Title

RECEIVED

Change in Company's premium or rate level produced by rale revision effective 4/1/2007

JAN 3 0 2007

	(1)	(2)	DIVISION OF INSURANC SPRINGFIELD
		Annual Premium	Percent
	<u>Coverage</u>	Volume (Illinois) *	<u>Change (+ or -) **</u>
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	163,065	7.0%
10.	Extended Coverage	163,065	7.0%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	es filing only apply to certain territory (ter es, see Summary Page 1 for breakdown		
	ef description of filing. (If filing follows ra	tes of an advisory organization	on, specify organization):
** (	Adjusted to reflect all prior rate chang Change in Company's premium level whi will result from application of new rates.	ch 	Federated Service Insurance Company ame of Company
			Dward tammel

Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	01/01/2007 for both NB & RB
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
<ol> <li>Automobile Liability Private         Passenger Commercial</li> <li>Automobile Physical Damage         Private Passenger Commercial</li> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> </ol>		
<ul><li>5. Glass</li><li>6. Fidelity</li><li>7. Surety</li><li>8. Boiler and Machinery</li></ul>	00.050	0.00
9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other  Line of Insurance	-88,656	-0.90
Does filing only apply to certain territory (  Brief description of filing. (If filing follow 2007 for both New Business and Rene	territories) or certain classes? If so, specifies rates of an advisory organization, species and Business, we wish to file revisions evising the rates to our Terrorism program	cify organization): <u>Effective January 1,</u> to our currently approved Commercial
Memorandum.  *Adjusted to reflect all prior rate changes		The Statistics with the Street of August 1
**Change in Company's premium level w	hich will result from application of new rate	na Insurance Company
		Name of Company  Check Coloria  Official - Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

JAN 3 2007

### Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate level p	produced by rate revision effective	6-1-2007 NB, 7-1-2007 RB
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$9,850,681	-36.7%
	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		<u> </u>
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other	<u> </u>	
	Line of Insurance		
Doe	es filing only apply to certain territory (terri	tories) or certain classes? If so, specify:	
Brie	ef description of filing. (If filing follows rate	s of an advisory organization, specify org	anization): ISO
		· · · · · · · · · · · · · · · · · · ·	
	ljusted to reflect all prior rate changes. hange in Company's premium level which	n will result from application of new rates.	
		Indiana	Insurance Company
		Na	me of Company
		Amy LaCroix.	Technician, Regulatory Filing
			Official - Title



### ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Ch	ange in Company's premium or rate level	produced by rate revision effective	6-1-2007 NB, 7-1-2007 RB
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
•	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$10,706,143	-37.3%
	Extended Coverage		
11.	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
Do	es filing only apply to certain territory (terr	itories) or certain classes? If so, specify:	
Bri	ef description of filing. (If filing follows rate	es of an advisory organization, specify org	anization): ISO
	djusted to reflect all prior rate changes. Change in Company's premium level which	n will result from application of new rates.	
		The Nether	lands insurance Company
		Na	ame of Company
		Arny LaCroix,	Technician, Regulatory Filing
			Official – Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

JAN 24 2007

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	01/01/2007 for both NB & RB
(1) Coverage	(2) Annual Premium Volume (Illi <u>nois)*</u>	(3) Percent Change (+ <u>or -)**</u>
Coverage	Volumo (minolo)	
Automobile Liability Private     Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft	1000000	
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	-96,355	
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	<u> </u>	
13. Commercial Multi-Peril		
14. Crop Hail		
15. OtherLine of Insurance		
Line of insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specif	y: n/a
2007 for both New Business and Rene	vs rates of an advisory organization, spe ewal Business, we wish to file revisions	to our currently approved Commercial
Property Program. At this time we are i	revising the rates to our Terrorism program	m as outlined in the enclosed Actuarial
Memorandum.		
*Adjusted to reflect all prior rate changes **Change in Company's premium level v	s. which will result from application of new rate	es.
	The Nethe	erlands Insurance Company
		Name of Company
		any Johnia
		Official – Title

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDEPR

JAN 3 2007

SPRINGFIELD, ILLINOIS

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		6-1-2007 NB, 7-1-2007 RB	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
_			
1.	Automobile Liability Private		
_	Passenger Commercial		
2.	Automobile Physical Damage		
2	Private Passenger Commercial		
3.	Liability Other Than Auto		
4. 5.	Burglary and Theft Glass		
6.	Fidelity		
7.	Surety	· · · · · · · · · · · · · · · · · · ·	
8.	Boiler and Machinery		
9.	Fire	\$23,359	-24.2%
	Extended Coverage	<b>\$20,000</b>	
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other		
	Line of Insurance		
Do	es filing only apply to certain territory (ten	ritories) or certain classes? If so, specify:	
Brie	ef description of filing. (If filing follows rate	es of an advisory organization, specify org	anization): ISO
	djusted to reflect all prior rate changes. Change in Company's premium level whic	h will result from application of new rates.	
		Peerless Ind	emnity Insurance Company
			ame of Company
		Amy LaCroix.	Technician, Regulatory Filing
			Official - Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

JAN 24 2007

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	01/01/2007 for both NB & RB	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private     Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
Boiler and Machinery		
9. Fire	-210	-0.90
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril 14. Crop Hail		
15. Other Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify	r: <u>n/a</u>
2007 for both New Business and Ren	ws rates of an advisory organization, spec ewal Business, we wish to file revisions t	o our currently approved Commercial
	revising the rates to our Terrorism program	nas outlined in the enclosed Actuarial
Memorandum.		
	<u>.</u>	
•		
*Adjusted to reflect all prior rate changes **Change in Company's premium level v	s. which will result from application of new rate	S.
	Peerless Inc	demnity Insurance Company
		Name of Company
		any facroix
		Official – Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

JAN 3 2007

### ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate level	produced by rate revision effective	6-1-2007 NB, 7-1-2007 RB
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liebility Private		
١.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage	, , , , , , , , , , , , , , , , , , ,	
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft	<del></del>	
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$3,810,107	-37.0%
10.	Extended Coverage		
11.	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
D	£(		
DO	es filing only apply to certain territory (ter	ritories) or certain classes? If so, specify:	
Brie	ef description of filing. (If filing follows rate	es of an advisory organization, specify orga	anization): ISO
	ljusted to reflect all prior rate changes. hange in Company's premium level whic	h will result from application of new rates.	
			Insurance Company
		Na	me of Company
		Amy LaCroix, 7	echnician, Regulatory Filing
			Official - Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

JAN 24 2007

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate leve	I produced by rate revision effective	01/01/2007 for both NB & RB
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ <u>or -)**</u>
Coverage	Volume (minois)	Onungo (* Or /
Automobile Liability Private     Passenger Commercial		
Automobile Physical Damage     Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass	<del></del>	
6. Fidelity		
7. Surety		
8. Boiler and Machinery	-	
9. Fire	-34,291	-0.90
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Line of Insurance		
Does filing only apply to certain territory (ter	ritories) or certain classes? If so, specif	y: <u>n/a</u>
Brief description of filing. (If filing follows	rates of an advisory organization, spec	cify organization): Effective January 1.
2007 for both New Business and Renewa	al Business, we wish to tile revisions i	to our currently approved Commercial
Property Program. At this time we are revi	sing the rates to our Terronsm program	n as outlined in the enclosed Actuarial
Memorandum.		
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whice	ch will result from application of new rate	es.
	Paeris	ess Insurance Company
	1 66116	Name of Company
		any falsoir
		Official – Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

JAN 3 2007

### RECEIVED

JAN 2 3 2007

Form (RF-3)

SUMMARY SHEET

Affairs

Official - Title

IDFPR (MPC) DIVISION OF INSURANCE SPRINGFIELD

•	Change in Company's premium or rat	e level produced by rate revision effective	e <u>3-01-2007</u>
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
_	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	50,723	-28.0%
10.	Extended Coverage	15,029	-10.3%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		-
14.	Crop Hail		
15.	Other Line of Insurance		
rief (		erritories) or certain classes? If so, specifing specification is rates of an advisory organization, specifing tumber CF-2006-RLA1	
* C	djusted to reflect all prior rate change hange in Company's premium level w sult from application of new rates.		
		She	Iter General Insurance
			npany
			Name of Company
		Bria	n Marcks, Coord Ins Dept

### RECEIVED

JAN 23 2007

Official - Title

IDFPR (MPC) DIVISION OF INSURANCE SPRINGFIELD

SUMMARY SHEET

	Change in Company's premium or rate	tive 3-01-2007	
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	44,930	-28.0%
10.	Extended Coverage	15,029	-10.4%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail	<del></del>	
15.	Other		
	Line of Insurance		-
Does f	iling only apply to certain territory (te	rritories) or certain classes? If so, spe	cify:
	1.00		
		rates of an advisory organization, spe	cify organization):
Imple	ementing ISO Revision Designation N	umber CF-2006-RLA1	
* A	djusted to reflect all prior rate changes	(a. 	
** C	hange in Company's premium level w	nich will	
re	sult from application of new rates.		
		S	helter Mutual Insurance Company
			Name of Company
			Name of Company
		<b>~</b>	de Marda Card I - B
			rian Marcks, Coord Ins Dept ffairs

Form (RF-3)

	Change in Company's premium or rat	e level produced by rate revision effective	03/01/2007
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass	-	
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$184,094	20.7%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
		erritories) or certain classes? If so, specify:	-
All t	erritories, all classes		
	•	s rates of an advisory organization, specify	
Ado	pting ISO's Advisory Prospective Los	ss Cost as contained in designation number	CF-2006-RLA1.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

DEC 2 9 2006

SPRINGFIELD ILLINOIS

Sompo Japan Ins. Co. of America
Name of Company

Mary Alado, State Filings Analyst

Official - Title

H29219D